

U.S. DEPARTMENT OF ENERGY
Federal Energy Regulatory Commission
Washington, DC 20426

**FERC FORM NO. 11: NATURAL GAS PIPELINE COMPANY QUARTERLY
STATEMENT OF MONTHLY DATA**

GENERAL INFORMATION

I. Purpose

This form is designed to obtain information concerning selected revenues and associated quantities.

II. Who Must Submit

Each natural gas company whose gas transported or stored for a fee exceeded 50 million Dth in each of the three previous calendar years.

III. When to Submit

Submit this report quarterly. The reports must adhere to the following schedule:

Report Period	Report Date
January-March	May 15
April-June	August 14
July-September	November 14
October-December	February 14

IV. What and Where to Submit

(a) Submit an original and two (2) copies of this form to:

Office of the Secretary
Federal Energy Regulatory Commission
Washington DC 20426

(b) Submit the form on electronic media. The formats for the electronic filing and a list of acceptable electronic media can be obtained at the Federal Energy Regulatory Commission, Division of Information Resources, Washington DC 20426.

GENERAL INFORMATION

V. Where to Send Comments on Public Reporting Burden

The public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any aspect of this collection of information, including suggestions for reducing this burden, to the Federal Energy Regulatory Commission, Washington, DC 20426 (Attention: Michael Miller, Office of the Executive Director, ED-30, 202-502-8415); and to the Office of Information and Regulatory Affairs, Office of the Management and Budget, Washington DC 20503 (Attention: Desk Officer for the Federal Energy Regulatory Commission).

You shall not be penalized for failure to respond to this collection of information unless the collection of information displays a valid OMB control number.

GENERAL INSTRUCTIONS

- I. Report data as outlined in the Uniform System of Accounts for Natural Gas Companies (U.S. of A.) (18 CFR Part 201). Data reported on this form must, when aggregated, be equal to the data reported on Form No. 2, aggregated.
- II. Indicate negative amounts by enclosing the figures in parentheses, (), or with a "-" sign preceding the first nonzero digit reported, except where otherwise noted.
- III. Report dollar entries in thousands. Report quantities in thousands of dekatherms.
- IV. Provide, by footnotes, a brief description of any adjustments significantly affecting this report.
- V. Report one Part II form for each month.
- VI. If a data item is not applicable, for example, a respondent has no storage rate schedules, its value must be omitted, that is, left blank. If a report item applies to the respondent, for example, the respondent has a sales rate schedule in its tariff, but there is no data to report during the month reported, enter a "0."

SPECIFIC INSTRUCTIONS

<u>Item</u>	Instruction
All	Refer to the form and/or Uniform System of Accounts (U.S. of A.) for Natural Gas Companies (18 CFR Part 201). Reference to account numbers in the U.S. of A. are provided in parentheses beside applicable data. Quantities must not be adjusted for discounts.
Part II, lines 2.001, 2.002 4.001, 4.002	Report revenues and quantities of gas by rate schedule. Add rows if necessary to report data for all rate schedules. The rate schedule must be identified in the same manner as identified in other reports to the Commission. Where transportation services are bundled with storage services, reflect only transportation Dth. When reporting storage, report Dth of gas withdrawn from storage and revenues by rate schedule. Add rows as necessary to report all rate schedules. When rows are added, the additional row numbers should follow in sequence, 2.001, 2.002, 2.003, <u>etc.</u> or 4.001, 4.002, 4.003, <u>etc.</u>
Part II	Revenues in Column (d) include transition costs from upstream pipelines. Revenue (Other) in Column (f) includes reservation charges received by the pipeline plus usage charges, less revenues reflected in Columns (d) and (e). Include in Column (f), revenue for Accounts 490-495.
Footnotes	<p>In Part I, enter a footnote reference for each item footnoted. The reference shall be a concatenation of the letter of the item footnoted and the number of the footnote. Enter the footnote number together with the footnote text in Part III. Enter up to ten footnote references separated by /. Refer to the item footnoted in the first position of the footnote reference (<u>e.g.</u>, e2 indicates footnote 2 applies to item e, the company's name. Use x if the footnote applies to the entire table, <u>e.g.</u>, x3).</p> <p>In Part II, the footnote reference shall be a concatenation of the column letter and the footnote number. Enter the footnote number together with the footnote text in Part III. Enter up to ten footnote references separated by /. Refer to the item footnoted in the first position of the footnote reference (<u>e.g.</u>, c5 indicates footnote 5 applies to the number in column c, the quantity. Use x if the footnote applies to the entire table, <u>e.g.</u>, x7).</p>
Pipeline Name	Enter the full legal name of the pipeline.
Pipeline Code	Enter the three digit FERC pipeline code. An updated list of three digit codes is provided on the Commission's web site at http://www.ferc.gov/industries/gas/gen-info/pipecode.asp . If your pipeline is not listed, call Tiquana Taylor at 202-502-8851 and one will be assigned.

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 STATEMENT OF MONTHLY DATA**

This report is mandatory under the authority granted by Sections 10 and 16 and sanctions provided by Section 21(b) of the Natural Gas Act. Failure to report may result in criminal fines, civil penalties and other sanctions as provided by law.

	Company Code Number (nnn)
Report Period	
	a. Begin Date (mm/dd/yyyy)
	b. End Date (mm/dd/yyyy)
	c. Submission Date (mm/dd/yyyy)
	d. Original/Revised Filing (O/R)

PART I: IDENTIFICATION			
e. Name of Company			
f. Address of Company:			
(1) Number and Street	(2) City	(3) State	(4) Zip Code
g. Person Authorized to Sign This Report:			
(1) Signature		(2) Phone Number (Including Area Code)	
h. Footnotes: Enter footnote designation as defined in the specific instructions.			

Company Code Number	Month Reported (mm/yyyy)
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PART II: REVENUE DATA

Line No.	Item	Total Quantities (1000s of Dth) and Revenues (1000s of \$)					Footnote
		Quantity	Revenue (Transition Costs and Take-or-Pay)	Revenue (GRI & ACA)	Revenue (Other)	Revenue (Total)	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
1	Total Sales						
2	Transportation of Gas for Others						
2.001	[Rate Schedule Number]						
2.002	[Rate Schedule Number]						
3	Total Transportation						
4	Storage						
4.001	[Rate Schedule Number]						
4.002	[Rate Schedule Number]						
5	Total Storage						
6	Gathering						
7	Gathering-Firm						
8	Gathering-Interruptible						
9	Additional Revenues						
10	Products Sale and Extraction (490-492)						
11	Rents (493 and 494)						
12	Other Gas Revenues (495)						

Company Code Number

PART III: FOOTNOTES

Footnote
Number

Text of the Footnote